

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
IND.	DEP.	IND.	DEP.	IND.	DEP.			
1								51
2								52
3								53
4								54
5								55
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42								92
43								93
44								94
45								95
46								96
47								97
48								98
49								99
50								100
TOTAL IND.	8					TOTAL IND.		
TOTAL DEP.	35					TOTAL DEP.		
TOTAL CLAIMS	40					TOTAL CLAIMS		

PTO-1360 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
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